### FORM D

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



## FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVÁL
OMB Number: 3235-0076
Expires: August 31, 2008
Estimated average burden
Hours per response16.00

E ONLY
Serial
ECEIVED

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.
Name of Offering ( check if this is an amendment and name has changed, and indicate change) \$1,500,000 SECURED REDEEMABLE DEBENTURE AND WARRANTS
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE
Type of Filing: New Filing Amendment
A. BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer
Name of Issuer ( check if this is an amendment and name has changed, and indicate change)
NATIONAL AUTOMATION SERVICES, INC.
Address of Executive Offices (Number and Street, City, State, Zip Code) Wall Bracessing Telephone Number
2053 PABCO ROAD 808tigh (702) 642-7720
HENDERSON, NEVADA 89011
Address of Principal Business Operations (Number and Street, City, State, Zip Code) AUG 12 2000 Telephone Number
(if different from Executive Offices)
Brief Description of Business
Holding company for specialized automation control companies located in the southwestern English States
Type of Business Organization PROCESSED
company = AUG 2 5 2008
business trust limited partnership, to be formed
Month Year INDIVISON REUTERS
Actual or Estimated Date of Incorporation or Organization: 0 1 9 7 🛮 Actual 🗎 Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for
State:  CN for Canada; FN for other foreign jurisdiction)  N  V

### GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq.

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to this notice constitutes a part of this notice and must be completed.

	A.	BASIC IDENTIFIC	ATION DATA		
2. Enter the information requ					
• Each promoter of the	issuer, if the issuer ha	s been organized withi	n the past five years;		
securities of the issue	r;	vote or dispose, or dire			
			porate general and m	nanaging partners o	f partnership issuers; and
<ul> <li>Each general and mar</li> </ul>	naging partner of parti	nership issuers.			<u>-</u>
Check Box(es) that Apply:	Promoter	⊠ Beneficial     Owner	Executive Officer	□ Director     □ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
CHANCE, ROBERT W.					
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
2053 PABCO ROAD, HEN	<u>DERSON, NEVAD</u>	A 89011			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director     □	General and/or Managing Partner
Full Name (Last name first, if	individual)				
WOODS, JONATHAN D.					
Business or Residence Address	s (Number and Street,	City, State, Zip Code)	l		
2053 PABCO ROAD, HEN	DERSON, NEVAD	A 89011	<u></u>		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director     □ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
HANLEY, JODY R.					
Business or Residence Addres	s (Number and Street,	, City, State, Zip Code	)		
2053 PABCO ROAD, HEN	DERSON, NEVAD	A 89011			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer		General and/or Managing Partner
Full Name (Last name first, if	individual)				
RUIZ, MANUAL					
Business or Residence Addres	s (Number and Street	, City, State, Zip Code	)		
2053 PABCO ROAD, HEN	IDERSON, NEVAD	A 89011			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
O'CONNER, ROBERT H.					
Business or Residence Addres	ss (Number and Street	, City, State, Zip Code	)		
2053 PABCO ROAD, HEN	IDERSON, NEVAD	A 89011	<u></u>		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
STRACHAN, WILLIAM					
Business or Residence Address	ss (Number and Street	, City, State, Zip Code	)		

2053 PABCO ROAD, HENDERSON, NEVADA 89011

				В. І	NFORMA'	TION ABO	OUT OFFE	ERING				
		•		Answer als	o in Append	dix, Colum	n 2, if filing			,	Yes	No 🖾
2. What	is the mini	mum inves	stment that v	will be acce	epted from a	any inaivia	uai?					N/A
3. Does	the offering	g permit jo	int ownersh	ip of a sing	gle unit?		***************************************			•••••	Yes	No ⊠
com: offer with	mission or ing. If a per a state or s	similar res son to be l tates, list t	muneration listed is an a	for solicit associated t the broker	ation of pu person or ag or dealer.	rchasers in gent of a br If more th	n connection oker or dea an five (5)	on with sal ler register persons to	es of secu ed with the be listed ar	firectly, any rities in the SEC and/or e associated		
Full Nar	ne (Last na	me first, if	individual)									
KNIG	HTSBRII	OGE HO	LDINGS	, LLC D	/B/A KN	IGHTSE	BRIDGE	CAPITA	L, LLC	· - · · -		
			s (Number :		• .	•						
	NE 29TI f Associated		IUE, SUI	TE 306,	AVENT	URA, FI	<u> 33180</u>					
	Associated		Dealer									
			Has Solicit	ed or Inten	ds to Solici	t Purchaser	'S					
(Check Foreign	"All States	" or check	individual	States)								All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Nar	ne (Last na	me first, if	individual)	,								
			- 61 - 1	10	C'in Con	7: 0-1-						
Busines	s or Residei	ice Addres	s (Number	and Street,	City, State,	Zip Code)						
Name of	f Associated	Broker or	Dealer				-					
States in	Which Per	son Listed	Has Solicit	ed or Inten	ds to Solici	t Purchaser	'S					
(Check	"All States	" or check	individual	States)								All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	(ID) (MO) [PA] [PR]
Full Nar	ne (Last na	me first, if	individual)									
Busines	s or Residei	nce Addres	s (Number	and Street,	City, State,	Zip Code)						
Name of	f Associated	Broker o	Dealer	<del> </del>	<del></del>							
States in	Which Per	son Listed	Has Solicit	ed or Inten	ds to Solici	t Purchaser	ʻs					
(Check	"All States	" or check	individual	States)								All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] {MO] [PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND U	SE OF	PROCEED	S		
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggregate Tering Price	/	٩n	nount Already Sold
	Debt – SECURED REDEEMABLE DEBENTURE	\$	1,500,000	\$		1,500,000
	Equity -	\$	0	- \$	-	0
	Common Preferred (see below, Convertible Securities)	_		_	-	
Co	nvertible Securities: WARRANTS TO PURCHASE COMMON STOCK		0			0
Pa	rtnership Interests	_	0	-		0
Ot	her (Specify )	_	0	_	•	0
То	tal	\$	1,500,000	- \$	-	1,500,000
	Answer also in Appendix, Column 3, if filing under ULOE.			_	-	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if the answer is "none" or "zero."					
			Number			Aggregate ollar Amount
			Investors		C	of Purchases
	Accredited Investors		1	\$	_	1,500,000
	Non-accredited Investors		0	_ \$	_	N/A
	Total (for filings under Rule 504 only)		0	_ \$	_	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.					
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.					
	Type of offering		Type of		Do	ollar Amount
	Rule 505		Security	•		Sold
				_ \$	-	
	Regulation A			- `	-	
	Rule 504			- »	-	
	Total			- <sub>2</sub>	_	-
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees			\$		0
	Printing and Engraving Costs			\$	_	0
	Legal Fees		🗵	\$	_	30,000
	Accounting Fees and Escrow Fees		🗵	\$	_	1,000
	Engineering Fees			\$	_	0
	Sales Commissions (specify finders' fees separately)			\$	_	90,000
	Other Expenses (identify) <sup>2</sup> -				_	137,668.80
	TOTAL			\$	_	258,668.80

<sup>&</sup>lt;sup>1</sup> Consists of warrants to purchase up to 150,000 shares of common stock as an incentive to purchase the debenture.

<sup>2</sup> Consists of Wire Receipt Costs (\$48.80), Interest Deduction (\$25,000), Loan Commitment Fee (\$30,000), Due Diligence Fee (\$7,500), Commitment Fee (\$75,000) and Disbursement Fees (\$120).

C. OFFERING PRICE, NUI	MBER OF INVESTORS, EXPENSES	S AND	USI	E OF PROCI	EEDS		
b. Enter the difference between the aggregate of total expenses furnished in response to Part C – to the issuer."	Question 4.a. This difference is the "ad	ljusted	gross	proceeds	<b>s</b> _	1,	241,331.20
5. Indicate below the amount of the adjusted gross particle purposes shown. If the amount for any purposes the left of the estimate. The total of the payment set forth in response to Part C – Question 4.b. ab	pose is not known, furnish an estimate ts listed must equal the adjusted gross	and ch	neck 1	the box to			
			D	ayments to Officers, irectors & Affiliates		Pay Oth	ments To ers
Salaries and fees			\$	0		\$	0
Purchase of real estate			\$	0		\$	0
Purchase, rental or leasing and installation of machin	nery and equipment		\$	0		\$	0
Construction or leasing of plant buildings and facilit	ies		\$	0		\$	0
Acquisition of other businesses (including the value Offering that may be used in exchange for the assets pursuant to a merger)	or securities of another issuer	٦	\$	0	⊠	\$	1,240,000
Repayment of indebtedness			\$			\$	0
Working capital (includes product licensing and adv	ertising and marketing)		\$	0		\$	1,331.20
Other (specify):	•		•		_	\$	
· · · · · ·			\$	0		\$	0
Column Totals		Ш	\$	0		\$	0
Total Payments Listed (column totals added)					$\boxtimes$	\$	1,241,331.20
	D. FEDERAL SIGNATURE						
The issuer has duly caused this notice to be signe following signature constitutes an undertaking by the of its staff, the information furnished by the issuer to	ne issuer to furnish to the U.S. Securiti	es and	Exch	nange Commi	ssion, u		
Issuer (Print or Type) NATIONAL AUTOMATION SERVICES, INC.	Signature		Date MA	e .RCH 26, 200	)8		
Name of Signer (Print or Type)	Title of Signer (Print or Type)						
ROBERT CHANCE	PRESIDENT AND CHIEF EXECUTIVE OFFICER						
	1						

# ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001)

	E. STATE SIGNATURE
	E. STATE SIGNATURE
1.	ls any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? Yes ⊠
	See Appendix, Column 5, for state response.
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.
	ne issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the idersigned duly authorized person.
N	Suer (Print or Type) ATIONAL AUTOMATION SERVICES, NC.  Signature MARCH 26, 2008
	Tide of Signer (Print or Type)  OBERT CHANCE  Tide of Signer (Print or Type)  PRESIDENT AND CHIEF EXECUTIVE  OFFICER

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				APPEND	IX				
1	Intend t	to sell to credited s in State – Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		5 Disqualification under State ULO (if yes, attach explanation of waiver granted) (Part E – Item 1				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL	<u></u>								l
AK									
AZ						·			
AR									
CA									
со									
СТ									
DE									
DC									
FL									
GA									
ні									
ID									
IL									
IN									
IA	<b>.</b>								
KS									
KY									
LA					<u> </u>			.,	
МЕ									
MD									
МА									
МІ									
MN									
MS									
МО									
MT									
NE									
NV									

·				APPEND	IX				
1	Intend to sell to and aggregate non-accredited offering price investors in State offered in state		Type of security and aggregate offering price offered in state (Part C – Item 1)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E – Item 1)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
NH									
NJ									
NM									
NY									
NC									
ND									
ОН									
ок									
OR									
PA								•	
RI									
SC									
SD					·				
TN									
TX									
UT									
VT									
VA								l	
WA									
wv									
WI									
WY									
PR									
FOREIGN		Х	Debenture: \$1,500,000  Warrants:  Warrant to purchase 150,000 shares of common stock	1 <sup>3</sup>	\$1,500,000	0	0		х

<sup>&</sup>lt;sup>3</sup> Trafalgar Capital Specialized Investment Fund, which is the sole investor herein, resides in Luxembourg. 8

				APPENDI	X				
1	Type of security Intend to sell to non-accredited investors in State  3  Type of security and aggregate offering price offered in state				5 Disqualificatio under State ULC (if yes, attach explanation of waiver granted (Part E – Item				
State	Yes	- Item 1) No	(Part C - Item 1)	Number of Accredited Investors	(Part C –	Number of Non- Accredited Investors	Amount	Yes	No

